

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

CLARK TSONGAS VICTORY FUND

ADDRESS (number and street)
▼

PO Box 15

Check if different
than previously
reported. (ACC)

Readville

MA

02137

2. FEC IDENTIFICATION NUMBER ▼

C

C00605600

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y

01 / 01 / 2016

through

M M / D D / Y Y Y Y

03 / 31 / 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Gemma W Martin

Signature of Treasurer

Gemma W Martin

[Electronically Filed]

Date

M M / D D / Y Y Y Y

04 / 07 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

CLARK TSONGAS VICTORY FUND

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	6

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	39800.00	39800.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	39800.00	39800.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	1027.00	1027.00
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	1027.00	1027.00
8. Cash on Hand at Close of Reporting Period (from Line 27)	0.00	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

PAGE 3 / 12

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

CLARK TSONGAS VICTORY FUND

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	6

I. RECEIPTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:**(a) Individuals/Persons Other Than Political Committees****(i) Itemized (use Schedule A).....**

39800.00

39800.00

(ii) Unitemized.....

0.00

0.00

(iii) TOTAL of contributions from individuals ▶

39800.00

39800.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

0.00

0.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS

(other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))..

39800.00

39800.00

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:**(a) Made or Guaranteed by the Candidate.....**

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

(add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES

(Refunds, Rebates, etc.)

0.00

0.00

15. OTHER RECEIPTS

(Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

39800.00

39800.00

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 12

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	1027.00	1027.00
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	38773.00	38773.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	39800.00	39800.00

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	39800.00
25. SUBTOTAL (add Line 23 and Line 24).....	39800.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	39800.00
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	0.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 5 OF 12

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

CLARK TSONGAS VICTORY FUND

Full Name (Last, First, Middle Initial)

A. Naomi Aberly

Mailing Address 8 Mt Vernon Pl

City

Boston

State

MA

Zip Code

02108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA11AI.4123

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Karen Keating Ansara

Mailing Address PO Box 502

City

Essex

State

MA

Zip Code

01929

FEC ID number of contributing
federal political committee.

C

Name of Employer

At Home

Occupation

Homemaker

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA11AI.4127

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Deborah Benson

Mailing Address 79 West Concord St

City

Boston

State

MA

Zip Code

02118

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hinckley Allen & Snyder LLP

Occupation

Attorney

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA11AI.4117

Amount of Each Receipt this Period

2000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

6000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 12

☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)

CLARK TSONGAS VICTORY FUND

Full Name (Last, First, Middle Initial)

Nonnie Burnes

Mailing Address 16 Acorn St

City

Boston

State

MA

Zip Code

02108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Northeastern University

Occupation

Professor

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 05 / 2016

Transaction ID : SA11AI.4103

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Elyse Cherry

Mailing Address 46 Cotswold Rd

City

Brookline

State

MA

Zip Code

02445

FEC ID number of contributing
federal political committee.

C

Name of Employer

Boston Community Capital

Occupation

CEO

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2016

Transaction ID : SA11AI.4125

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Michael Crowe

Mailing Address 2 International Pl

City

Boston

State

MA

Zip Code

02110

FEC ID number of contributing
federal political committee.

C

Name of Employer

Choate, Hall & Stewart, LLP

Occupation

Attorney

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2016

Transaction ID : SA11AI.4129

Amount of Each Receipt this Period

1400.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5400.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 12
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
CLARK TSONGAS VICTORY FUND

A. Full Name (Last, First, Middle Initial) Susan Davies			Date of Receipt M M / D D / Y Y Y Y 03 / 10 / 2016		
Mailing Address 8 1/2 Maple Ave			Transaction ID : SA11AI.4107		
City	State	Zip Code	Amount of Each Receipt this Period _____ 2000.00		
Cambridge	MA	02139	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee.		C _____			
Name of Employer Self-Employed		Occupation Lactation Consultant			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 2000.00			
B. Full Name (Last, First, Middle Initial) Andrea Edlow			Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2016		
Mailing Address 530 Chestnut St			Transaction ID : SA11AI.4131		
City	State	Zip Code	Amount of Each Receipt this Period _____ 2000.00		
Newton	MA	02468	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee.		C _____			
Name of Employer Tufts Medical Center		Occupation Physician			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 2000.00			
C. Full Name (Last, First, Middle Initial) Kate Haffner			Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2016		
Mailing Address 74 Fenway #31			Transaction ID : SA11AI.4121		
City	State	Zip Code	Amount of Each Receipt this Period _____ 2000.00		
Boston	MA	02115	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee.		C _____			
Name of Employer Retired		Occupation Retired			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 2000.00			
SUBTOTAL of Receipts This Page (optional).....			_____ 6000.00		
TOTAL This Period (last page this line number only).....			_____		

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 12
 (check only one)
☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)
CLARK TSONGAS VICTORY FUND

A. Full Name (Last, First, Middle Initial) Jenny Netzer			Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2016		
Mailing Address 57 Crescent St			Transaction ID : SA11AI.4113		
City	State	Zip Code			
Cambridge	MA	02138			
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period 2000.00		
Name of Employer TCAM LLC		Occupation Real Estate Investment Management	<input type="checkbox"/> Memo Item		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2000.00			
B. Full Name (Last, First, Middle Initial) Laura Gassner Otting			Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 14 / 2016		
Mailing Address 56 Farlow Rd			Transaction ID : SA11AI.4111		
City	State	Zip Code			
Newton	MA	02458			
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period 2000.00		
Name of Employer Self Employed		Occupation CEO	<input type="checkbox"/> Memo Item		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2000.00			
C. Full Name (Last, First, Middle Initial) Emily M. Paul			Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2016		
Mailing Address 2 Avery St Apt 34H			Transaction ID : SA11AI.4119		
City	State	Zip Code			
Boston	MA	02111			
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period 2000.00		
Name of Employer Paul-McCoy Family Office Servi		Occupation CPA	<input type="checkbox"/> Memo Item		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2000.00			
SUBTOTAL of Receipts This Page (optional).....			6000.00		
TOTAL This Period (last page this line number only).....					

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

CLARK TSONGAS VICTORY FUND

Full Name (Last, First, Middle Initial)

A. Jane K Phillips

Mailing Address 102 Estabrook Rd

City

Concord

State

MA

Zip Code

01742

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

PSYCHOTHERAPIST

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		07		2016

Transaction ID : SA11AI.4101

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Gabriel Torres

Mailing Address 25 Willwood St

City

Winchester

State

MA

Zip Code

01890

FEC ID number of contributing
federal political committee.

C

Name of Employer

O'Connor Professional Group

Occupation

Director of Operations

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		24		2016

Transaction ID : SA11AI.4109

Amount of Each Receipt this Period

5400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Molly TurlishMailing Address 1070 Beacon St
#5C

City

Brookline

State

MA

Zip Code

02446

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA11AI.4115

Amount of Each Receipt this Period

2000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

12400.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 OF 12

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

CLARK TSONGAS VICTORY FUND

Full Name (Last, First, Middle Initial)

Katherine Villers

Mailing Address 20 Whit's End Rd

City

Concord

State

MA

Zip Code

01742

FEC ID number of contributing
federal political committee.

C

Name of Employer
Community CatalystOccupation
Business Executive

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2016

Transaction ID : SA11AI.4133

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Landis Becker Young

Mailing Address 88 Appleton St

City

Cambridge

State

MA

Zip Code

02138

FEC ID number of contributing
federal political committee.

C

Name of Employer
NoneOccupation
None

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		05		2016

Transaction ID : SA11AI.4105

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

4000.00

39800.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 12

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

CLARK TSONGAS VICTORY FUND

Full Name (Last, First, Middle Initial)

A. ActBlue

Mailing Address PO Box 441146

City	State	Zip Code
Somerville	MA	02144

Purpose of Disbursement
Credit card processing fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		17		2016

Amount of Each Disbursement this Period

237.00

☐ Memo Item**Transaction ID : SB17.4135****B. ActBlue**

Mailing Address PO Box 441146

City	State	Zip Code
Somerville	MA	02144

Purpose of Disbursement
Credit card processing fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		24		2016

Amount of Each Disbursement this Period

79.00

☐ Memo Item**Transaction ID : SB17.4137****C. ActBlue**

Mailing Address PO Box 441146

City	State	Zip Code
Somerville	MA	02144

Purpose of Disbursement
Credit card processing fee

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2016

Amount of Each Disbursement this Period

711.00

☐ Memo Item**Transaction ID : SB17.4138****SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1027.00

1027.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 OF 12

<input type="checkbox"/> 17 20a	<input checked="" type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
------------------------------------	---	-------------------------------------	------------------------------------

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NAME OF COMMITTEE (In Full)

CLARK TSONGAS VICTORY FUND

Full Name (Last, First, Middle Initial)

A. KATHERINE CLARK FOR CONGRESS

Mailing Address PO BOX 361

Date of Disbursement

M M / D D / Y Y Y Y
03 / 31 / 2016

City	State	Zip Code
MALDEN	MA	02148

Amount of Each Disbursement this Period

19386.50

Purpose of Disbursement
Joint fundraiser transfer

Category/ Type

☐ Memo Item

Transaction ID : SB18.4139

Candidate Name

KATHERINE CLARK

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: MA

District: 05

Full Name (Last, First, Middle Initial)

B. THE NIKI TSONGAS COMMITTEE

Mailing Address PO BOX 1454

Date of Disbursement

M M / D D / Y Y Y Y
03 / 31 / 2016

City	State	Zip Code
LOWELL	MA	01853

Amount of Each Disbursement this Period

19386.50

Purpose of Disbursement
Joint fundraiser transfer

Category/ Type

☐ Memo Item

Transaction ID : SB18.4141

Candidate Name

THE NIKI TSONGAS COMMITTEE

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: MA

District: 03

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

M M / D D / Y Y Y Y

City	State	Zip Code
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Amount of Each Disbursement this Period

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Purpose of Disbursement

Category/ Type

☐ Memo Item

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

38773.00

38773.00